



Deval L. Patrick
Governor
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Lieutenant Governor

The Commonwealth of Massachusetts
Executive Office of Public Safety & Security
Criminal History Systems Board

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Kevin M. Burke
Secretary of Public Safety
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Acting Executive Director

KEEP US INFORMED

Massachusetts's State Law requires that you keep us informed of any changes in your current name, address, and home/work telephone numbers, at all times.

Unless you inform us of these changes, we can not guarantee that you will receive the notifications for which you have been approved.

PLEASE CALL US IF YOU HAVE A NEW NAME, ADDRESS,
HOME OR WORK TELEPHONE NUMBER.

VICTIM SERVICE UNIT – (617) 660-4690

CHANGE OF CONTACT INFORMATION

Name: _____
Street Address: _____ Apt. _____
City/Town: _____ State: _____ Zip: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____

Please include the following:

Offender's Name: _____ **Certification #** _____

Please mail/fax to: Criminal History Systems Board, Victim Services Unit
200 Arlington Street, Suite 2200
Chelsea, MA 02150
Fax: 617-660-5973